(Print Name of lobbyist)

PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

for LOBBYISTS (RSA Chapter 15)

1

RECEIVED

JUL 26 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s		Bouley	Alex	Kautrou	bas S
II. Name of lobbyist's	nartnership, firm	or corporation, if	any:		
Don	nah. &	Roulas	LL	.C.	
(Nam	e of partneyship, firm	or corporation)	7		•••
17 1	pot St.	#3 (Town/City)	Conc	Ord 1	/ H 0330/
Business Address: (Str	æi) . 1/ ^ 1	(Town/City)		(State)	(2.1)
(63) 228- (Telephone)	1601 ()(F	ax)	e-mail	
III. This statement co reportable expense tr	vers: (Choose one ansactions which a	– file separate rep ire not attributab	orts for each le to any one o	client, OR you may lient).	y file a separate report for
All reportable trans	sactions occurring it	n the months prior	to the reporting	g date relative to the	following client:
Comm	unity S	upport /	Vetwo	ration Form)	
OR	(Full Name of Chen	t as it appears on the	Loody in regim	,	
☐ All reportable trans	actions by the lobby ular client.	yist (including the	lobbyist's fami	ly), or the lobbying	firm listed below which are
	April 25, 2018 [ו	In	ly 25, 2018	
IV. Date of Report Reports cover: activ	ity from date of regist		activity fr	com 4/1/18 to 6/30/18	
·	October 31, 2018 activity from 7/1/18 to			nuary 30, 2019 🗌 irom 10/1/18 to 12/31/	18
V. There have been If this box is checked, Concord, NH 03301.	no fees received complete just this fo	and no reporta	ble transacti o the Secretary	ons made since the of State's Office, S	ne last report. Grant House, Room 204,
VI. Check if addition	al reports are atta	ched:			
(NY If you have receive	ed fees or made ext	ocnditures, you mu	st file Addend	lum A- Fees and Ex	rpenses
Evnence Reimbursem	ent				oort of Honorariums or
☐ If you, your firm,	or your family has	made political con	tributions, you	must file Addendu	m C- Political Contributions
Sworn Statement/Af I have read RSA 15, I and complete to the b (Signature of lobbyis	RSA 15-B, RSA 14- cst of my knowledg	C and RSA 664 ar	nd hereby swea	or affirm that the f	Foregoing information is true

PLEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

1. Name of Lobbyist(s) Jim Bouley Alex Ko	utroubas
II. Name of lobbyist's partnership, firm or corporation, if any:	
Dennehy & Bouley LLC (Name of partnership, firm or corporation)	
III. Name of Client Community Support Network 7	mcpate 057/24/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or public relations services
a) Total of all fees received in this reporting period	a) \$
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ // , 000, 00
c) Total of all fees received to date (Add lines a and b)	0)\$ 17,500-00
 d) Indicate the amount of any such fees that are due, but have not yet been paid 	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if expenditures are made by nay be filed for the lobbyist(s)/firm aggregate total of all expenses paid penses; (b) the aggregate total of all e: meals purchased during a business is than \$10 that is given to the persor d with a value of \$25.00 or less); and rting period of greater than \$25.00 for e of greater than \$25, purchase of a r than \$25, but not greater than \$50 expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm	that the foregoing information
is true and complete to the best of my knowledge and belief.	
J& ly	07/24/18
(Signature of lobbyist)	(Date)
Jim Bouley (Print Name of Johnson)	
(Print Name of lobbyist)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist
Statement of Income and Expenses for:
Name of Lobbying partnership, firm, or corporation: Dennehy & Bouley LLC
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client): Community Support Network Inc.
Date of Report (check one):
April 25, 2018
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
·
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) On 24 18 (Date)
Alex Koutroubas
(Print Name of lobbyist)